

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

Items to be completed in Proof of Claim form**Court, Name of Debtor, and Case Number:**

Fill in the federal judicial district where the bankruptcy case was filed (for example, District of Delaware), the bankruptcy debtor's name, and the bankruptcy case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is located at the top of the notice.

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the Bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if the trustee or another party in interest files an objection to your claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Use this space to report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

4. Secured Claim.

Check the appropriate box and provide the requested information if the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See DEFINITIONS, below.) State the type and the value of property that secures the claim, attach copies of lien documentation, and state annual interest rate and the amount past due on the claim as of the date of the bankruptcy filing.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. §§ 507(a).

If any portion of your claim falls in one or more of the listed categories, check the appropriate box(es) and state the amount entitled to priority. (See DEFINITIONS, below.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Amount of Claim that qualifies as an Administrative Expense under 11 U.S.C. § 503(b)(9) State the value of any goods received by the debtor within 20 days before the date of commencement in which the goods have been sold to the debtor in the ordinary course of the debtor's business.**7. Credits:**

An authorized signature on this proof of claim serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

8. Documents:

Attach to this proof of claim form redacted copies documenting the existence of the debt and of any lien securing the debt. You may also attach a summary. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary. FRBP 3001(c) and (d). If the claim is based on the delivery of health care goods or services, see instruction 2. Do not send original documents, as attachments may be destroyed after scanning.

Date and Signature:

The person filing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

DEFINITIONS**Debtor**

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

Creditor

A creditor is the person, corporation, or other entity owed a debt by the debtor on the date of the bankruptcy filing. See 11 U.S.C. § 101(10).

Claim

A claim is the creditor's right to receive payment on a debt that was owed by the debtor on the date of the bankruptcy filing. See 11 U.S.C. § 101(5). A claim may be secured or unsecured.

Proof of Claim

A proof of claim form is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the clerk of the same bankruptcy court in which the bankruptcy case was filed.

Secured Claim Under 11 U.S.C. § 506(a)

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car.

A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien. A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

Unsecured Claim

An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

Claim Entitled to Priority Under 11 U.S.C. §§ 507(a)

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

Redacted

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor should redact and use only the last four digits of any social-security, individual's tax-identification, or financial-account number, all but the initials of a minor's name and only the year of any person's date of birth.

Evidence of Perfection

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

INFORMATION**Acknowledgement of Filing a Claim**

To receive acknowledgment of your filing, please enclose a stamped self-addressed envelope and a copy of this proof of claim. You may view a list of filed claims in this case by visiting the Claims and Noticing Agent's website at <http://www.bmcgroup.com/UrbanBrands>

Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(c), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 *et seq.*), and any applicable orders of the bankruptcy court.

PLEASE SEND COMPLETED PROOFS OF CLAIM TO:

Via Regular U.S. Mail **Via Overnight Courier**

BMC Group, Inc.	BMC Group, Inc.
Attn: Urban Brands	Attn: Urban Brands
Claims Processing	Claims Processing
P.O. Box 3020	18750 Lake Drive East
Chanhassen, MN 55317	Chanhassen, MN 55317

Custom Mechanical Service, Inc.
 Lakeside Branch
 P.O. Box 9409
 Richmond, Virginia 23228
 Telephone 804/266-8284

Invoice 27374
 Customer **ASHLEY**

Sold To:
 URBAN BRANDS
 C/O ASHLEY STUART STORES
 100 METRO WAY
 SECAWCES, NJ 07094

Ship To:
 URBAN BRANDS
 C/O ASHLEY STUART STORES
 100 METRO WAY
 SECAWCES, NJ 07094

Date		Ship Via		F.O.B		Terms			
06/28/10		Delivered		Origin		Net 30 Days			
Purchase Order Number			Order Date		Salesperson		Our Order Number		
QUOTED JOB			06/22/10		RC		None		
Quantity		Item Number	Description			Tax	Unit Price	Amount	
Required	Ship	B.O.							
1	1		PARTS	QUOTED CRANE, T-STAT, CURB, CAP, FILTER			N	4714.00	4714.00
1.00	1.00		LABOR	QUOTED LABOR TO INSTALL			N	2186.00	2186.00

		NonTaxable Subtotal		6900.00	
		Taxable Subtotal		0.00	
		Tax		0.00	
		Total		6900.00	
		Less Amount Paid		0.00	
		Balance		6900.00	

To pay by Mastercard or Visa please call 804/266-8284

CUSTION

MECHANICAL SERVICE INC.

Air Conditioning • Heating • Chillers • Temperature Control Systems
Sales and Service

WORK ORDER

(804) 266-8284
Fax (804) 266-0326

PO Box 9409

Richmond, Virginia 23228

No. [27374]

SERVICE AT: *Ashley Stewart
Spring Rock*

Date: *6-22-2010*

Customer Order No.	Equipment	Model No.	Serial No.

A - Check
 B - Adjusted
 C - Cleaned
 D - Lubricated
 E - Repaired
 F - Installed
 Indicate By

A B C D E F							A B C D E F									
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Started Heat
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Started Cooling
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check Voltage and Amps
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check Air Condition
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check Heat
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check Chiller
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check Refrigeration
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check Pressures
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Use of Special Instruments
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vacuum Pump
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Charging Cylinder
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electronic Leak Detector
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recovery Machine
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Misc. Materials Used
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Acetylene
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Nitrogen
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Paste
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Solder
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Silfos

HOURS	SUN	MON	TUES	WED	THUR	FRI	SAT	TOTAL
STRAIGHT TIME			23					23
OVERTIME			4					4

OTHER WORK PERFORMED:

Shut off existing unit & removed R22 refrigerant. Removed unit from roof with crane & prepped curb. Installed curb adaptor & attached duct work. Installed unit from other roof & connected all electrical. Installed P trap & 6000 thermostat. Started unit & checked operation. Installed temporary cap on other roof curb.

Refrig. Type <i>R22</i>	Misc. Materials Used
Recovered Qty. <i>10/lbs</i>	Acetylene
Returned to System	Nitrogen
Reclaimed	Paste
	Solder
	Silfos

Fee for Special Instruments \$

- Materials Used:
- ① CRANE SERVICE
 - ③ 16x24x2
 - ② 18x24x2
 - ① Honeywell 6000 Thermostat
 - misc electrical used
 - ① curb ADAPTOR
 - ① Temporary cap
 - misc pre used

Complete Incomplete

Customer Signature: _____

Service Technician: *Steve / Christina / Jimmy / Mark*

Total Materials	4714.00
Labor	2186.00
Total Invoice	<i>Quoted Job</i> 6900.00

Customer agrees to pay a FINANCE CHARGE, as defined below, on any invoice or account which is unpaid within thirty (30) days of the date services were rendered, as well as all costs and Attorney's fees incurred to collect any such unpaid account. FINANCE CHARGE is computed by a periodic rate of 2% per month (or a minimum charge of 50¢ for balances under \$33.00) which is an ANNUAL PERCENTAGE RATE of 24% applied to the previous balance without deducting current payments and/or credits appearing on this invoice/statement.

Custom Mechanical Service, Inc.

Lakeside Branch
 P.O. Box 9409
 Richmond, Virginia 23228
 Telephone 804/266-8284

Invoice 27381

Customer ASHLEY

Sold To:

URBAN BRANDS
 C/O ASHLEY STUART STORES
 100 METRO WAY
 SECAWCES, NJ 07094

Ship To:

URBAN BRANDS
 C/O ASHLEY STUART STORES
 100 METRO WAY
 SECAWCES, NJ 07094

Date		Ship Via		F.O.B.		Terms			
07/01/10		Delivered		Origin		Net 30 Days			
Purchase Order Number			Order Date		Salesperson		Our Order Number		
ROOF TOP UNIT			06/29/10		RC		None		
Quantity			Item Number		Description		Tax	Unit Price	Amount
Required	Ship	B.O.							
1	1		PARTS		MISC MATERIAL	N	19.32	19.32	
1	1		PARTS		15UF CAPACITOR	N	28.48	28.48	
1	1		PARTS		CONDENSER FAN MOTOR	N	295.70	295.70	
1	1		PARTS		BLADE	N	70.57	70.57	
1	1		PARTS		10 UF CAPACITOR	N	6.35	6.35	
1.00	1.00		LABOR		LABOR	N	422.00	422.00	

		NonTaxable Subtotal		842.42
		Taxable Subtotal		0.00
		Tax		0.00
		Total		842.42
		Less Amount Paid		0.00
		Balance		842.42
To pay by Mastercard or Visa please call 804/266-8284				

CUSTON

MECHANICAL SERVICE INC.

Air Conditioning • Heating • Chillers • Temperature Control Systems
Sales and Service

WORK ORDER

(804) 266-8284
Fax (804) 266-0326

PO Box 9409

Richmond, Virginia 23228

No. [27381]

SERVICE AT: *Ashley Stewart*

Date: *6-29-2010*

Customer Order No.	Equipment <i>Roof-top unit</i>	Model No.	Serial No.
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A - Check B - Adjusted C - Cleaned D - Lubricated E - Repaired F - Installed Indicate By

A B C D E F							A B C D E F								
														<input type="checkbox"/>	Started Heat
														<input type="checkbox"/>	Started Cooling
														<input type="checkbox"/>	Check Voltage and Amps
														<input type="checkbox"/>	Check Air Condition
														<input type="checkbox"/>	Check Heat
														<input type="checkbox"/>	Check Chiller
														<input type="checkbox"/>	Check Refrigeration
														<input type="checkbox"/>	Check Pressures
														<input type="checkbox"/>	Use of Special Instruments
														<input type="checkbox"/>	Vacuum Pump
														<input type="checkbox"/>	Charging Cylinder
														<input type="checkbox"/>	Electronic Leak Detector
														<input type="checkbox"/>	Recovery Machine
														<input type="checkbox"/>	Misc. Materials Used
HOURS							TOTAL							Refrig. Type	
STRAIGHT TIME														Recovered Qty.	
OVERTIME														Returned to System	
														Reclaimed	
														Solder	
														Silts	

OTHER WORK PERFORMED:

Checked rooftop A/C i found bad 1st stage condenser fan motor blade & capacitor. Found bad capacitor on 2nd stage condenser fan. Removed bad 1st stage condenser fan motor, blade & capacitor. Installed new fan motor, blade & capacitor. Removed bad capacitor on 2nd stage fan & installed new one. Landed all wires & started system, checked operation.

Fee for Special Instruments \$ *19.32*

Materials Used:

<i>15.0F capacitor</i>	<i>28.48</i>
<i>condenser fan motor</i>	<i>295.70</i>
<i>blade</i>	<i>70.57</i>
<i>10.0F capacitor</i>	<i>6.35</i>

Complete Incomplete

Customer Signature: _____
Service Technician: *Steve / Christian*

Total Materials	<i>420.42</i>
Labor	<i>422.00</i>
Total Invoice	<i>842.42</i>

Customer agrees to pay a FINANCE CHARGE, as defined below, on any invoice or account which is unpaid within thirty (30) days of the date services were rendered, as well as all costs and Attorney's fees incurred to collect any such unpaid account. FINANCE CHARGE is computed by a periodic rate of 2% per month (or a minimum charge of 50¢ for balances under \$33.00) which is an ANNUAL PERCENTAGE RATE of 24% applied to the previous balance without deducting current payments and/or credits appearing on this invoice/statement.

Custom Mechanical Service, Inc.

Lakeside Branch
 P.O. Box 9409
 Richmond, Virginia 23228
 Telephone 804/266-8284

Invoice 27354

Customer ASHLEY

Sold To:

URBAN BRANDS
 C/O ASHLEY STUART STORES
 100 METRO WAY
 SECAWCES, NJ 07094

Ship To:

URBAN BRANDS
 C/O ASHLEY STUART STORES
 100 METRO WAY
 SECAWCES, NJ 07094

Date		Ship Via		F.O.B.		Terms		
06/11/10		Delivered		Origin		Net 30 Days		
Purchase Order Number			Order Date		Salesperson		Our Order Number	
7110 MIDLOTHIAN TNPK			06/08/10		RC		None	
Required	Quantity	Ship	B.O.	Item Number	Description	Tax	Unit Price	Amount
1.00	1.00			LABOR	LABOR TO CHECK HVAC EQUIPMENT	N	234.00	234.00

							NonTaxable Subtotal 234.00 Taxable Subtotal 0.00 Tax 0.00 Total 234.00 Less Amount Paid 0.00 Balance 234.00	
To pay by Mastercard or Visa please call 804/266-8284								234.00

LUSION

MECHANICAL SERVICE INC.

Air Conditioning • Heating • Chillers • Temperature Control Systems
Sales and Service

WORK ORDER

(804) 266-8284

Fax (804) 266-0326

PO Box 9409

Richmond, Virginia 23228

No. [27354]

SERVICE AT: 7110 Midlothian

Date: 6-8-2010

Customer Order No.	Equipment	Model No.	Serial No.

A - Check B - Adjusted C - Cleaned D - Lubricated E - Repaired F - Installed Indicate By

A B C D E F							A B C D E F											
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Started Heat	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Started Cooling	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Check Voltage and Amps	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Check Air Condition	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Check Heat	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Check Chiller	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Check Refrigeration	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Check Pressures	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Use of Special Instruments	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Vacuum Pump	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Charging Cylinder	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Electronic Leak Detector	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Recovery Machine	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Misc. Materials Used	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Acetylene	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Nitrogen	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Paste	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Solder	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Silfos	<input checked="" type="checkbox"/>			
HOURS							SUN	MON	TUES	WED	THUR	FRI	SAT	TOTAL	Refrig. Type	Qty.	Misc. Materials Used	
STRAIGHT TIME									5							Recovered		Acetylene
OVERTIME																Returned to System		Nitrogen
OTHER WORK PERFORMED:																Reclaimed		Paste
																		Solder
																		Silfos

*Checked rooftop unit & found
1 circuit low on refrigerant.
Indoor fan motor starter was
tripped & fan was off
Reset fan & started
checked belt/ bearings.
Thermostat is missing & 2nd stage
circuit has control problem & will
not run.
Need to replace compression contacts
& indoor fan contractor.
Need to replace two condenser fan
motors & blades, capacitors.
Need to leak check 1 stage & repair.
Need to install thermostat & correct control problem*

Complete Incomplete

Fee for Special Instruments \$			
Materials Used:			
Total Materials			
Labor			234.00
Total Invoice			234.00

Customer Signature: _____
Service Technician: Steve

Customer agrees to pay a FINANCE CHARGE, as defined below, on any invoice or account which is unpaid within thirty (30) days of the date services were rendered, as well as all costs and Attorney's fees incurred to collect any such unpaid account. FINANCE CHARGE is computed by a periodic rate of 2% per month (or a minimum charge of 50¢ for balances under \$33.00) which is an ANNUAL PERCENTAGE RATE of 24% applied to the previous balance without deducting current payments and/or credits appearing on this invoice/statement.

CUSTOMER MECHANICAL SERVICE INC.

Air Conditioning • Heating • Chillers • Temperature Control Systems
Sales and Service

WORK ORDER

(804) 266-8284
Fax (804) 266-0326

PO Box 9409

Richmond, Virginia 23228

No. [27358]

SERVICE AT: *7110 Midlothian*

Date: *6-8-2010*

Customer Order No.	Equipment	Model No.	Serial No.

A - Check B - Adjusted C - Cleaned D - Lubricated E - Repaired F - Installed Indicate By

A B C D E F													A B C D E F													Started Heat
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
																									<input type="checkbox"/> Started Cooling	
																									<input type="checkbox"/> Check Voltage and Amps	
																									<input type="checkbox"/> Check Air Condition	
																									<input type="checkbox"/> Check Heat	
																									<input type="checkbox"/> Check Chiller	
																									<input type="checkbox"/> Check Refrigeration	
																									<input type="checkbox"/> Check Pressures	
																									<input type="checkbox"/> Use of Special Instruments	
																									<input type="checkbox"/> Vacuum Pump	
																									<input type="checkbox"/> Charging Cylinder	
																									<input type="checkbox"/> Electronic Leak Detector	
																									<input type="checkbox"/> Recovery Machine	
																									<input type="checkbox"/> Misc. Materials Used	
																									<input type="checkbox"/> Acetylene	
																									<input type="checkbox"/> Nitrogen	
																									<input type="checkbox"/> Paste	
																									<input type="checkbox"/> Solder	
																									<input type="checkbox"/> Silfos	

HOURS	SUN	MON	TUES	WED	THUR	FRI	SAT	TOTAL
STRAIGHT TIME								
OVERTIME								

OTHER WORK PERFORMED:

*Need to clean condenser & have indoor fan motor checked.
Need to eliminate old control panel in back of space & wire thermostat to control indoor fan.*

Fee for Special Instruments \$

Materials Used:

Complete Incomplete

Customer Signature: _____

Service Technician: *Steve*

Total Materials _____

Labor _____

Total Invoice _____

Customer agrees to pay a FINANCE CHARGE, as defined below, on any invoice or account which is unpaid within thirty (30) days of the date services were rendered, as well as all costs and Attorney's fees incurred to collect any such unpaid account. FINANCE CHARGE is computed by a periodic rate of 2% per month (or a minimum charge of 50¢ for balances under \$33.00) which is an ANNUAL PERCENTAGE RATE of 24% applied to the previous balance without deducting current payments and/or credits appearing on this invoice/statement.